

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted With Initial Filing OR <input type="checkbox"/> Declaration submitted after Initial filing (surcharge required)		Attorney Docket Number	A5-013 US
		First Named Inventor	Masum CHOUDHURY
		Application Number	10/583,523
		Filing Date	June 16, 2006
		Art Unit	TBD
		Examiner Name	TBD

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND TAPERED WAVEGUIDE FOR IMPROVING LIGHT COUPLING EFFICIENCY BETWEEN OPTICAL FIBERS AND INTEGRATED PLANAR WAVEGUIDES AND METHOD OF MANUFACTURING SAME

(Title of the invention)

The specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 06/16/2006 as United States Application Number or PCT International Application Number 10/583,523.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Direct all correspondence to:	<input checked="" type="checkbox"/> The address associated with Customer Number: 23683	OR	<input type="checkbox"/> Correspondence address below
Name Charles S. Cohen			
Address 2222 Wellington Court			
City Lisle	State IL	Zip 60532	

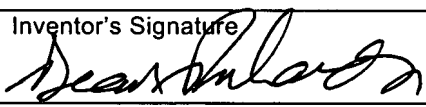
Country US	Telephone (630) 527-4660	Email chuck.cohen@molex.com	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name Masum		Family Name or Surname CHOUDHURY	
Inventor's Signature <i>A. N. R. Rosen Choudhury</i>			Date 07/13/07
Residence: City Naperville	State IL	Country US	Citizenship US
Mailing Address 795 Olesen Drive			
City Naperville	State IL	Zip 60540	Country US

NAME OF ADDITIONAL JOINT INVENTOR, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any)) Moshe		Family Name or Surname ORON	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

NAME OF ADDITIONAL JOINT INVENTOR, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any)) Thomas R.		Family Name or Surname STANCZYK	
Inventor's Signature <i>Thomas R. Stanczyk</i>			Date 7.13.07
Residence: City Lisle	State IL	Country US	Citizenship US
Mailing Address 5800 Oakwood Drive, 5E			
City Lisle	State IL	Zip 60532	Country US

NAME OF ADDITIONAL JOINT INVENTOR, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any)) Ram		Family Name or Surname ORON	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

NAME OF ADDITIONAL JOINT INVENTOR, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any)) Ariela		Family Name or Surname DONVAL	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

NAME OF ADDITIONAL JOINT INVENTOR, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any)) Dean		Family Name or Surname RICHARDSON	
Inventor's Signature 			Date 7/13/2007
Residence: City Wilmette	State IL	Country US	Citizenship US
Mailing Address 3112 Wilmette Avenue			
City Wilmette	State IL	Zip 60091	Country US

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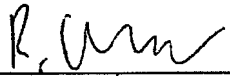
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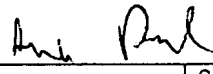
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Address 2222 Wellington Court			
City Lisle	State IL	Zip 60532	

Country US	Telephone (630) 527-4660	Email chuck.cohen@molex.com	
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Mailing Address 795 Olesen Drive			
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Given Name (first and middle (if any)) Moshe		Family Name or Surname ORON	
Inventor's Signature <i>M. Oron</i>			Date <i>July 15, 2007</i>
Residence: City REHOVOT	State ISRAEL	Country ISRAEL	Citizenship ISRAELI
Mailing Address 26 BUSHEL STR.			
City REHOVOT	State	Zip 76404	Country ISRAEL

NAME OF ADDITIONAL JOINT INVENTOR, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
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Mailing Address 5800 Oakwood Drive, 5E			
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NAME OF ADDITIONAL JOINT INVENTOR, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any)) Ram		Family Name or Surname ORON	
Inventor's Signature 		Date 15-Jul-07	
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Mailing Address 7a Shikmim St.			
City Nej ziona	State	Zip 74064	Country Israel

NAME OF ADDITIONAL JOINT INVENTOR, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any)) Ariela		Family Name or Surname DONVAL	
Inventor's Signature 		Date 15/7/07	
Residence: City Rosh Haayin	State	Country ISRAEL	Citizenship ISRAELI
Mailing Address 14th Efron St.			
City Rosh Haayin	State ISRAEL	Zip 4050	Country ISRAEL

NAME OF ADDITIONAL JOINT INVENTOR, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
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Inventor's Signature		Date	
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